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Complete if Known FEE TRANSMITTAL Application Number 10/632,849 Filing Date August 4, 2003 for FY 2004 First Named Inventor IMAI et al. NOV 1 7 2003 Examiner Name Effective 10/01/2003. Patent fees are subject to annual revision. 2817 Applicant Claims small entity status. See 37 CFR 1.27 11-175 Attorney Docket No. TOTAL AMOUNT OF PAYMENT

	, , , , , , , , , , , , , , , , , , , ,					2000	COUNTY,			
METHOD OF PA	FEE CALCULATION (continued)									
X Check Credi	it card Money Other None		3. ADDITIONAL FEES Large Entity Small Entity							
Deposit Account		Fee	Fee	Fee	Fee	Faa Daaasladii			Fee Paid	
Deposit		Code 1051	(\$) 130	2051	(\$) 65	Fee Description Surcharge – late filing	fee or oath			7
Account Number 50-1147				2001	50	Outerlange hate ming	, ice or oath			
Deposit Account Name	& BETHARDS, PLC	1052	50	2052	25	Surcharge – late prov cover sheet	isional filing fee	· · ·		
The Commissioner is authorized to: (check all that apply)			130	1053	130	Non-English specifica	tion	Ç.)		ال.
Charge fee(s) indicated below Credit any overpayments			2,520	1812	2,520	For filing a request for		nination		4.
X Charge any additional fee(s) during the pendency of this application			920*	1804	920*	Requesting publication Examiner action	n of SIR prior to	•		, ()
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.			1,840*	1805	1,840*	Requesting publication Examiner action	n of SIR after			
FE	E CALCULATION	1251	110	2251	55	Extension for reply wi	thin first month	ì		, } ;
1. BASIC FILING	FEE	1252	420	2252	210	Extension for reply wi	thin second mon	th 📆		7.1
	Entity	1253	950	2253	475	Extension for reply wi	thin third month			1
Fee Fee Fee Code (\$) Code	(\$) Fee Description Fee Paid	1254	1,480	2254	740	Extension for reply wi	thin fourth month			1
1001 770 2001	385 Utility filing fee	1255	2,010	2255	1005	Extension for reply wi	thin fifth month			1
1002 340 2002	170 Design filing fee	1401	330	2401	165	Notice of Appeal			<u> </u>	1
1003 530 2003	265 Plant filing fee	1402	330	2402	165	Filing a brief in suppo	rt of an appeal			7
1004 770 2004	385 Reissue filing fee	1403	290	2403	145	Request for oral hear	ng			1
1005 160 2005	80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a p	oublic use procee	ding		1
,		1452	110	2452	55	Petition to revive - un	avoidable			1
Į.	SUBTOTAL (1) (\$) 0	1453	1,330	2453	665	Petition to revive - un	intentional			1
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE			1,330	2501	665	Utility issue fee (or rei	ssue)		ļ	1
	Fee from Extra Claims below Fee Paid	1502	480	2502	240	Design issue fee			l	1
	o''= 0 × 18 = 0	1503	640	2503	320	Plant issue fee				1
Independent Claims	3···= 0 × 86 = 0	1460	130	1460	130	Petitions to the Comm	nissioner			1
Multiple Dependent	=	1807	50	1807	50	Processing fee under	37 CFR 1.17(q)			
	Entity	1806	180	1806	180	Submission of Informa	ation Disclosure	Stmt]
Fee Fee Fee Code (\$) Code	Fee Fee Description (\$)	8021	40	8021	40	Recording each pater property (times number		,	40	
1202 18 2202	9 Claims in excess of 20	1809	770	2809	385	Filing a submission af (37 CFR § 1.129(a))				
1201 86 2201	43 Independent claims in excess of 3	1810	770	2810	385	For each additional in examined (37 CFR §				
1203 290 2203	145 Multiple dependent claim, if not paid	1801	770	2801	385	Request for Continued		€)	 	1
1204 86 2204	43 **Reissue independent claims over original patent	1802	900	1802	900	Request for expedited of a design application]
1205 18 2205	9 **Reissue claims in excess of 20 and over original patent		'			a. a acoign application	•			1
SUBTOTAL (2) (\$) 0 Other fee (specify)										
" or number previously paid, if greater, For Reissues, see above Reduced by Basic Filing Fee Paid							AL (3)	(\$) 40	l	1
SUBMITTED BY Complete (if applicable)										
Name (Print/Type)	DAVID G. POSZ		egistration l ttorney/Age		37,70)1	Telephone		07-9110	,

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Signature

^ TRANSMITTAL		Application Number	10/632,849						
FORM			Filing Date	August 4, 2003					
(to be used for all correspondence after initial filing)			First Named Inv ntor	IMAI et al. 2817					
			Group Art Unit						
1 7 2003			Examiner Name	:					
HON 1 1 2 2 2 2			Attorney Docket Number	11-17	5				
ENCLOSURES (check all that apply)									
× i	Fee Transmit	tal Form	X Ass	signment Papers r an Application)		After Allowance Communication to Group			
X Fee Attached X Dra			awing(s)		Appeal Communication to Board of Appeals and Interferences				
Amendment / Response Lice			ensing-related Papers		Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)				
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	Anidavits/deciaration(s) Pro			Convert a ovisional Application		Status Letter			
	Extension of Time Request Pot			wer of Attorney, Revocation ange of Correspondence dress		Additional Enclosure(s) (please identify below):			
	Fxpress Abandonment		rminal Disclaimer						
	Information Disclosure Statement Sn		nall Entity Statement						
	Certified Copy of Priority Document(s)		Re	quest of Refund					
	Response to Missing Parts/ Remark		Remarks						
Response to Missing Parts under 37 CFR 1.52 or 1.53									
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT									
Firm or Individu	1 113VIA CE MACE IMAA NA 37 70111								
Signature									
Date		November 17, 200)3						